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Mr. VanRaden joined the National Institute of Allergy and Infectious Diseases (NIAID) in 1985 and its Biostatistics Research Branch (BRB) when the latter was created in 2002. He has continued to collaborate with or advise scientists mainly in two NIAID Divisions, i.e. Microbiology and Infectious Diseases and Intramural Research, as well as in other components of NIAID and NIH, such as the NIH Department of Transfusion Medicine. In those activities his focus has been primarily on the design and analysis of clinical trials and epidemiological cohort studies. Mr. VanRaden has served on many Data and Safety Monitoring Boards, some ongoing. He also serves as the Executive Secretary for the NIAID ICTDR DSMB, a standing Board that monitors multiple studies of tropical diseases. He is an alternate member of the NIAID Institutional Review Board. Besides his responsibilities for purely statistical matters, Mr. VanRaden has managed NIAID contracts for data coordinating centers. Prior to joining NIAID, Mr. VanRaden was a statistician at the University of Pittsburgh, where he analyzed data on cardiac angioplasties. That is also where he earned the Master of Arts degree in Applied Statistics in 1982. His B.A. was awarded by Knox College in the History and Philosophy of Science in 1974. Currently, Mr. VanRaden has ABD status in Biostatistics at George Washington University. (*Updated April, 2005*)

Interests:

Clinical trials, Statistical consulting, Protocol writing and review, Project development, Data and safety monitoring, Institutional Review Board, Bioassay.

Selected Publications:

Simonsen, L, Morens, DM, et al (2001). Effect of rotavirus vaccination programme on trends in admission of infants to hospital for intussusception. *The Lancet* 358, 1224-1229.

Blackwelder, WC, VanRaden, MJ, and Deloria, MA (1997). Estimation of pertussis vaccine efficacy in the presence of covariates in three randomized trials. *Developments In Biological Standardization* 89, 161-166.

Conry-Cantilena, C, VanRaden, M, et al (1996). Routes of infection, viremia, and liver disease in blood donors found to have hepatitis C virus infection. *New England Journal of Medicine*. 334, 1691-1696.

Palenicek, JP, Graham, NMH, et al (1995). Weight-loss prior to clinical AIDS as a predictor of survival. *Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology* 10 , 366-373.

Zucconi, SL, Jacobson, LP, et al (1994). Impact of immunosuppression on health-care use by men in the Multicenter AIDS Cohort Study (MACS). *Journal of Acquired Immune*

Deficiency Syndromes and Human Retrovirology 7, 607-616.

Giorgi, JV, Ho, HN, et al (1994). CD8+ lymphocyte-activation at Human-Immunodeficiency-Virus type-1 seroconversion - development of HLA-DR+ CD38-CD8+ cells is associated with subsequent stable CD4+ cell levels. Journal of Infectious Diseases 170, 775-781.

Zhou, SYJ, Kingsley, LA, et al (1993). A method to test for a recent increase in HIV-1 seroconversion incidence - results from the Multicenter AIDS Cohort Study (MACS). Statistics In Medicine 12, 153-164.

Groothuis, JR, Simoes, EAF, et al (1993). Prophylactic administration of respiratory syncytial virus immune globulin to highrisk infants and young-children. New England Journal of Medicine 329, 1524-1530.

Lyketsos, CG, Hoover, DR, et al (1993). Depressive symptoms as predictors of medical outcomes in HIV Infection. Journal of the American Medical Association 270,2563-7.

Lyketsos, CG, Hoover, DR, et al (1993). Depressive symptoms as predictors of medical outcomes in HIV-infection. Journal of The American Medical Association 270, 2563-2567.